

## American Legion Auxiliary (ALA) – Membership Application For Argonne Post 56, Sherwood, Oregon

		Applicant Info	rmation			
Name(First)		(M. Initial)		(Last)		
Mailing Address						
vianing ruuress	(Street)		(City)	(State) (Z	Zip)	
(Home Phone)	(C	Cell Phone)		(Email Address)		
	17 and under	$\square$ 18 and over - Have	you been a n	nember previously $\Box Y$	$\Box N$	
Date of Birth – Required)	(Age)	ge) (Age) (If yes fill in				
(Previous Unit #, City an	d State)			(ALA ID Number	er if known)	
<b>Signature</b> Signature of Applicant or lega				_		
Signature of Applicant or lega	ıl guardian if un	der 18)		(Date)		
		Eligibility Infor	mation			
E <b>ligible Through</b> Name of Veteran you are relat	ted to. If you are	e a female Veteran joining	the ALA list	your own name)		
f Living(American Legion ID #)		(Post #)		(City and State)		
☐ Deceased – If the Vetera			•			
DD214 Discharge Papers vi Veteran Served:  WW1 WARP WW1 WW1 WW1 WW1 WW1 WW1 WW1 WW1 WW1 WW	(4/6/1917 – 11	/11/1918	After 12/7/19	941.	mother	
☐ Grandfather ☐ Sister ☐	☐ Daughter ☐	☐ Granddaughter ☐ Se	lf			
To be completed by The A east one day of active duty Adjutant's Signature	during the dat	es marked above and w	as honorable	e discharged or is still ser		
Membership Dues: 2026 decompleted form, a check for Sherwood, OR 97140. Onc 30 days.	r \$40.00 to AL	A Unit 56 and Mail to:	The Americ	an Legion Auxiliary, 225	48 SW Pine St,	
Optional: I am interested i Helping Veterans and t Programs and others I building, and property Other	their families. Helping with co _ Helping witl	Involvement in yo omputer work and IT. h social events, help pro	uth activities Helping epare and co	to maintain and improve ok meals etc.	the Post	
ues Receipt from America					<i>≡</i> =AMERICAN	
pplicant's name			Receip	t of \$40.00 for 2026 dues	LEGION	
cruiter's Name R			Recrui	Recruiter's Phone		
agraitar's Signatura				Date		